



Kimberly A. Foster
Executive Director

LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES

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DR. HARRIETTE F. WILLIAMS

APPROVED MINUTES

The General Meeting of the Commission for Children and Families was held on Monday, **February 5, 2007**, in room 739 of the Kenneth Hahn Hall of Administration, 500 West Temple Street, Los Angeles. **Please note that these minutes are intended as a summary and not as a verbatim transcription of events at this meeting.**

COMMISSIONERS PRESENT (Quorum Established)

Carol O. Biondi
Helen A. Kleinberg
Dr. La-Doris McClaney
Rev. Cecil L. Murray
Sandra Rudnick
Adelina Sorkin
Dr. Harriette F. Williams

COMMISSIONERS ABSENT (Excused/Unexcused)

Patricia Curry
Hon. Joyce Fahey
Ann E. Franzen
Susan F. Friedman
Wendy L. Ramallo

APPROVAL OF MINUTES

The minutes of the January 22, 2007, general meeting were unanimously approved.

CHAIR'S REPORT

- With the arrival of executive director Kimberly Foster, interim executive director Kate Edmundson has moved to another assignment. Chair Kleinberg expressed appreciation to the Executive Office for providing staff during the Commission's transition, as well as training for Ms. Foster. Ms. Edmundson will be invited to a future Commission meeting to be thanked personally for her assistance.

- The roster of Commissioner phone numbers and addresses is kept confidential by the office; if anyone working with given Commissioners wishes to contact them personally, please request that information directly from the Commissioner. Otherwise, messages will be passed along by the office.

DIRECTOR'S REPORT

- The state of California has submitted a proposal that would disallow \$20 million in Federal funds from the Title IV-E waiver, which would reduce Los Angeles County's savings to \$57 million over the waiver's five years. The county does not believe that the state has the authority to pass this disallowance, and director Trish Ploehn did not wish to send any kind of message that this proposal was acceptable. Because of this, she pulled the waiver plan from the Board agenda last week.

She assured Commissioners, however, that the waiver is alive and well. The Board of Supervisors has rallied behind the Department of Children and Family Services, contacting the governor and arranging a conference call this week with his office to discuss both the disallowance and the waiver calculations the state is using, which are less advantageous to the county than those used by the Federal government. These issues should be resolved soon, and the waiver plan will return to the Board agenda.

- Prior to the departure of former director David Sanders, the Board of Supervisors had authorized DCFS and the Chief Administrative Office to work with the Annie E. Casey Foundation around the waiver and prevention issues. This Friday, Chair Kleinberg, Vice Chair Rudnick, and Commissioner Williams will attend an all-day conference to hear ideas on evaluating the prevention initiative. In addition, Angela Carter and her staff are working with Casey representatives to achieve the initiative's desired goals by involving community partners.
- The Mental Health Services Act is providing \$500,000 for respite care for severely emotionally disturbed children and youth through the Department of Mental Health, although that contract has not yet been funded. DCFS plays a minor role in this effort, but will play a much larger role in the next MHSA agenda item, which is prevention and early intervention. Ms. Carter will represent DCFS in those negotiations on behalf of the prevention initiative, and Chair Kleinberg encouraged the involvement of Commissioners in the labor-intensive MHSA planning process, similar to last year's for the community supports piece.

Michael Rauso, Chuck Tadlock, and Roberta Medina have been representing the department on MHSA committees and work groups, and on its representative council that votes on final proposals. With the shift to prevention, they will be joined by Angela Carter. The MHSA governing council includes around 70 votes in all, but DCFS gets only one vote despite the large numbers of young people affected by these programs. Commissioner Williams suggested a meeting between Ms. Ploehn and DMH director Marv Southard to discuss expanding DCFS's role. Ms. Ploehn likened the situation to California's 58 counties being given equal representation despite vast

differences in population and area. In its administration, the youth authority at least breaks the state out into northern and southern regions, Commissioner Biondi commented, and the state should differentiate between large and small counties. (No small county, for example, wanted to institute structured decision-making.) Commissioner Williams suggested involving legislative advocates from the Chief Administrative Office to begin to talk about this issue with the state, and Chair Kleinberg agreed that the Commission should consider it in the future.

- As requested at the last Commission meeting, Ms. Ploehn presented a chart of DCFS youth who are parents, noting that the nine males listed as fathers is almost certainly an undercount. Commissioner Biondi suggested contacting Westside Children's Center, which hosted a conference on this issue a couple of years ago, to see if they have continued to track these numbers. The Probation Department also tracks the numbers of juvenile parents within the delinquency system, and Commissioner Biondi asked DCFS to include figures for both departments on a combined chart. (In the Children's Planning Council's recent juvenile justice study, one finding was that young women in Probation who have children were the group with the most problems, and Commissioner Biondi suggested contacting Jennifer Owen at Camp Scott for more information.) Chair Kleinberg also asked Ms. Ploehn to find out the ages of the children and whether those under age five are enrolled in child care or preschool programs through First 5 LA, Head Start, or other entities. Commissioner McClaney requested an additional break-out by ethnicity.

Ms. Foster asked if education plans developed for teens under DCFS also include planning for the education of their children. The majority of the parents listed on the existing chart are under 18, Commissioner Williams pointed out, which means that their children are very likely under DCFS's aegis as well. "It's a small population," Chair Kleinberg said. "We should be able to ensure that they get services."

- Medical director Dr. Charles Sophy had a productive meeting last week with the Department of Public Health, agreeing on a six-office pilot through which co-located DPH nurses will be given the same ability to work with DCFS children as DCFS nurses have. The pilot is planned for three to six months, after which an expansion will be considered.
- In answer to a question from Vice Chair Sorkin regarding data, Ms. Ploehn said that the one-year contract with the inter-university research consortium has expired and discussions continue with regard to another year's contract. Dr. Jacquelyn McCroskey presented to the Commission last December on the consortium's findings, and Chair Kleinberg suggested a follow-up.

FAMILY REUNIFICATION COMMITTEE

The committee met last week to consider its responsibility within the waiver plan, and had questions about personnel working on family reunification within the department and what internal and external committees exist. Committee members recommended that

most of their work be done in subcommittees that would then report back to the larger body, which would report in turn to the Commission. Collecting baseline data prior to waiver implementation and tracking changes over time is a priority, but the committee needs to know what kind of data the department is gathering, how often it is delivered, and what elements it thinks important for showing how the waiver is moving ahead. Chair Kleinberg also mentioned that Commissioners are not receiving much of the data they used to get regularly.

EDUCATION COORDINATING COUNCIL

Last week was the ECC's ninth meeting and members voted to continue with current leadership: Chair José Huizar and Vice Chairs Michael Nash and Berisha Black. An information-sharing process between schools, caseworkers, children's attorneys, and court-appointed special advocates (CASAs) was agreed upon, and a data match with foster youth enrolled in the Pasadena Unified School District was presented. The Pomona Unified School District also made a presentation on programs funded by a recent Federal grant, and Chair Kleinberg hopes that the DCFS Pomona office is working closely with that school district, especially with regard to the education and development of children birth to age five. Although Head Start regulations mandate enrollment priority for youngsters in foster care, the ratio of teachers to children may not allow the creation of additional slots. (Los Angeles Universal Preschool takes four-year-olds, but it functions in specific areas of the city only.) The ECC is not tracking preschool enrollment yet, but knows it needs to, and is encouraging everyone to consider 'education' as not just an elementary-school-and-up issue.

FAMILY PRESERVATION

The family preservation program, which the Commission was instrumental in establishing in the early 1990s, works with families and children to safely keep them together or to reunify them quickly if children are removed. The program's yearly combined allocation for DCFS and Probation is \$38 million. Angela Carter extended her public appreciation to Dr. Barbara Solomon, principal investigator of the family preservation evaluation, for tirelessly continuing with that effort despite contract disputes and a lack of financial support from the county in providing the needed information.

The last evaluation of family preservation was done in 2004, Dr. Solomon said, and its findings were used as a basis for the shift toward prevention, since family preservation was found to be much more effective at the front end than family reunification. The thrust of the recent evaluation was to document outcomes, but only eight months of data—February through October 2005—was available because of contract delays. Dr. Solomon's report focuses on the extent to which the priorities established by families and provider agencies at a case's beginning were reported as achieved when the case was closed. It separates family preservation families, those receiving alternative response services (where an allegation of abuse is made but the case is not opened in DCFS, in hopes that services will prevent families from entering the system), and Probation families, which are all approached differently by provider agencies. Family preservation cases are routinely assessed for risk at the opening and the closing of the case, while risk assessments

are performed for alternative response cases only at case opening. (According to Dr. Solomon, to properly compare outcomes, family strengths and needs assessments should be done for all cases at closing as well as at opening.)

Over 800 cases received standard family preservation services from community-based organizations, and a large percentage achieved all or most of the priorities set. Probation cases were the most problematic, since key family members often did not participate and services are terminated when probation ends or a probationer is detained, even when work with the family needs to continue. In general, families may receive family preservation services for up to a year, though Danita Henderson from SHIELDS for Families, Inc., a family preservation lead agency, said that extensions are routinely granted. As long as the case is open, Otho Day said, DCFS will provide services.

Dr. Solomon expressed concerns about data entry, since a large number of cases were opened and closed on the same day, or within a couple of weeks. These are most likely administrative entries, since no services were provided, and stripping them out indicates a much larger degree of compliance than the full data set demonstrates. Cooperation has been superb from much of the family preservation staff, she said, but the DCFS information technology unit is terribly overburdened and understaffed, and could not collaborate with evaluators in a timely way. The ongoing monitoring and training of provider agencies is also underdeveloped. The program began with 28 family preservation networks, and has now expanded to 41 agencies with 66 sites. Despite this growth, evaluation funding was halved from the \$400,000 budget in 2004 (already inadequate), then cut in half again, to \$198,000, during the last 18 months. Everyone wants credible data, Dr. Solomon said, and an evaluation component is usually funded at about 10 percent of a program's budget. Here, it's not even half of 1 percent. Family preservation managers were told that two university-based projects—her group and the Inter-University Research Consortium—could not be funded at the same time, so the family preservation evaluation was paid for with two \$99,999 discretionary-funds proposals, which must be under \$100,000. If the county is truly interested in documenting the effectiveness of this program, Dr. Solomon maintained, it must fund training, support, and monitoring for the 66 sites so that data is correctly entered into the system.

Commissioner Williams asked if recent increases in DCFS clerical staff positions could help with making staff available for family preservation input. Dr. Solomon explained that data entry is done by CSWs in the regional offices and by in-home counselors in the family preservation agencies, so an increase in the clerical budget would have little impact. Within the information technology services unit, programmers rather than clerical staff are needed. Of the additional \$512,000 approved in April 2006 for the DCFS budget, Ms. Ploehn said, none went to ITS, but 38 more items are now in the process of being approved. The problem is filling positions and keeping employees on board, since the county cannot match private sector pay levels. An additional 5.5 percent raise has been approved, but ITS staffing typically runs at about two-thirds of what is ideal.

Chair Kleinberg expressed dismay at family preservation's being in operation for 15 years without a truly comprehensive review. Now that the waiver implementation plan calls for the program's expansion, how can anyone know where it does its best work? With only about 1,550 cases involved in her study, Dr. Solomon was reluctant to make generalizations. Some provider sites have entered most data from their cases; most that haven't are new to the program, and her contract afforded no opportunity to help them. The protocol includes user-friendly forms that can be completed and submitted online, but the system will not generate all the information it can without weekly monitoring by DCFS staff to make sure that all the data is there. (Engineers have devised ways to generate reports in narrative form, which could update in-home counselors, be modified for court reports, and so on.) A detailed statistical analysis, Dr. Solomon said, could answer many questions about court referrals, services recommended versus those received (because of gaps in availability), which family members received what services and what the outcomes were, and so on. The data is there, but staff to analyze it, as well as ongoing training to make sure that the data entered is credible and accurate, still is necessary.

If family preservation is a major part of prevention, Commissioner Williams asked, why are money and resources not being committed to finding out if its strategies work? She characterized the problem as a policy and budget issue. If the goal is to be accountable to the public and to families, how can that be accomplished if no one is sure that money is being spent correctly in the first place? Commissioner Biondi also expressed shock that the evaluation's funding had been cut, especially in an era when programs don't get funded without evidence that they work.

Chair Kleinberg asked about recidivism once cases are closed with children at home. Dr. Solomon said that those statistics, too, could be analyzed if the information were obtained from DCFS; a request has been made to the information technology unit to notify the program when any closed cases come back into the system. Ms. Ploehn agreed to make determining recidivism rates for family preservation cases a priority.

Commissioner Murray asked about the high numbers of African-American babies being born out of wedlock, now estimated at between 50 and 60 percent, and Dr. Solomon acknowledged that those figures have dramatically increased over the last decade for all ethnicities. The reason is not so much deterioration within the family as the deterioration of supports around the family, which is why family preservation services are essential. Every case referred from the courts to family preservation means that someone in DCFS has recommended out-of-home placement. The fact that family preservation can serve these families with only a small percentage going on to placement indicates its success, since these cases are already at such high risk.

Commissioner Williams asked about evaluation specifics—in particular, families not receiving family preservation services, 30 percent of whom refused them or dropped out of the program (approximately 11 percent of the total number of families during the evaluation period). What is the department's follow-up with these families to protect the children? If they no longer have an open case, does another hotline referral need to be

made? Ms. Henderson explained that changes in the database protocol meant that cases opened and closed within 30 days were not teased out of the data stream during the evaluation period. When community-based liaisons, for instance, fail to check with agencies about open slots prior to referring families, those cases may show as open in the computer system. Peter Fonseca of the Assistance League of Southern California stressed that program participation is voluntary, and a number of families stay for only a short period of time despite efforts to persuade them to continue. Almost all families participate for at least three months, though, and when a family leaves, a multidisciplinary case planning committee meeting is convened to try and find out why. The percentages of families dropping out of the program vary by office. In Pomona, for example, he estimated that between 1 and 2 percent of cases leave the program early; in North Hollywood, 5 to 6 percent; in Metro North, 8 to 10 percent; and in Pasadena, 7 to 9 percent. In Mr. Fonseca's opinion, the most effective referrals are made by emergency response and command post workers, though he encouraged further training. Cases also come through from the 'back end' of the system, where waiting lists can be four to five weeks.

Laura Holtzman from the Alliance for Children's Rights echoed Commissioner Williams's concerns, asking both about what happens to families who refuse services and to those who are categorized as being at 'some risk' when the case is closed, but whose program objectives are not reached. If the family doesn't follow through, its fate is not a provider agency responsibility unless an agreement exists that the agency will call in a hotline referral so that DCFS knows the case needs further assessment. She also asked how many cases are referred directly from the court system to prevent the removal of the child. Mr. Fonseca replied that, depending on how cases are opened, many are in the voluntary family maintenance section, and DCFS brings maybe 20 to 40 percent to court. One criterion of structured decision-making is that the children's social worker meet with the family before categorizing a child as 'at risk.' In Ms. Henderson's experience, those refusing services are a small number, and her agency always informs the CSW. The alternative response category has higher numbers of refusals since families generally don't want people in their home if they have no open case with the department. In her 12 years with family preservation, Ms. Henderson has seen a marked shift to higher-risk cases. In the past, a single dirty drug test meant detained children, but now the parent goes into treatment and children are left in the home. Recidivism rates might have risen a little, but that doesn't mean that the program is a failure. Services are also valuable during the reunification process, if children are ultimately placed, so that the changed dynamic of a family can be stabilized. In cases where there is 'some risk' to the children when a case is closed, families are connected to ongoing services, often through other programs offered by family preservation agencies.

Commissioner Biondi asked how family preservation interacts with court-ordered wrap-around, especially since some agencies provide both. Jennifer Fentress from the San Fernando Valley Community Mental Health Center said that her agency tries to coordinate higher-risk family preservation families with wraparound, but if the services needed are very intense, staff will refer elsewhere, usually to voluntary family maintenance. Ms. Henderson noted that wraparound can be more acceptable to families since it is geared to

helping troubled adolescents, while DCFS “protects children”—presumably from something their parents are doing wrong. Even so, family preservation is seen as a positive thing in her community, and her agency keeps families linked with other networks.

Kimberly Foster asked about challenging cases, particularly those with undiagnosed or misdiagnosed mental health issues or serious gang affiliations, and coordination with the Department of Mental Health and other resources. Probation officers seldom attend multidisciplinary case planning committee meetings, Mr. Fonseca said, even though gang unit staff ostensibly have lower caseloads, and it’s been difficult to change Probation’s concentration on probationers to a focus on their families, who may be deeply involved in gang activity or, if younger siblings are present, at grave risk of becoming so.

Commissioner Biondi asked if family preservation services are mandated by the dependency and delinquency courts, and Dr. Solomon replied that although families are often given the option of participating in family preservation or having a child removed, the courts insist that participation is voluntary. Elmo Cormier from Probation said that most delinquency courts do not order a minor’s involvement, but minors are assessed by their probation officers for needs relative to family preservation. Commissioner Biondi suggested that delinquency judges may not be aware of the resources; as mentioned, Probation looks only at the ward of the court, not at the four younger brothers, say, who may also be at risk. When a minor is referred to family preservation, Mr. Cormier said, the department incorporates siblings.

The four probation liaison positions previously funded through family preservation were eliminated with the program’s new contract, thus gutting a whole system of referral and follow-up. In addition, prior to August 2005, a unit of nine probation officers and one supervisor existed to process referrals to family preservation, a procedure that worked well. When that unit was disbanded, referrals became the responsibility of about 1,000 juvenile probation officers, decentralizing the process and fragmenting knowledge about the program itself. Chief Robert Taylor, as part of his ‘unmet needs’ budget request in 2006–2007, asked for the family preservation unit to be refunded. If approved by the Board of Supervisors, Mr. Day said, that will be part of the ‘unmet needs’ third phase, to be received in September 2007 at the earliest. (He did not know the dollar amount.) In the meantime, 90 percent of the juvenile field officers—excluding camp staff, since minors do not use the program while in camp—have undergone a two-hour training on family preservation. Ms. Fentress reported that since those trainings, referrals have doubled to her agency from Probation, and the myth within that department that family preservation no longer existed has been thoroughly debunked. However, with the loss of the Probation unit, no structured decision-making information is available on probation cases, Dr. Solomon said, and the ability to evaluate those cases has ended.

Chair Kleinberg asked the agency representatives on the panel to share what they felt was being done well within the family preservation program. Especially in terms of spending Title IV-E waiver dollars, how can the county get the most bang for its buck?

Ms. Henderson believes that the program is in one of the best places it's been for years: children are thriving in their own homes and resources in the community are helping them stay there. SHIELDS is successful in cases involving substance abuse, though more residential treatment facilities are needed where mothers can go with their children. In terms of mental health, the agency tries to prevent hospitalization by linking with service providers to make sure participants are taking their medications properly (a typical recidivism issue), encouraging parental support systems, and educating older children to recognize triggers and carry out a safety plan. She believes that waiver dollars could be used to address gang issues, especially where entire communities are affected, by supporting community youth with protection and after-school activities. Compton, for example, has no L.A.'s BEST or Juvenile Justice Crime Prevention Act programs, no teen centers, no bowling alleys, and no theatres. Housing is another issue, and agency staff do the best they can to sustain families who are living with 10 people in a two-bedroom apartment.

Referrals are high and agencies are working well with the department, on the whole, to get needs answered quickly, though Ms. Henderson called for more financial support for the DCFS family preservation unit, whose staffing has decreased as the networks themselves have grown. The procurement unit, which processes purchases of auxiliary items such as stoves and refrigerators, is subject to delays of two to three months, and it's often easier for agencies to simply buy an appliance and get reimbursed. The evaluation, too, needs a higher budget and proper staffing or it cannot yield the results everyone wants.

Mr. Fonseca briefly reviewed his perceptions of DCFS since working as a CSW in the early 1990s, when 60,000 children were in out-of-home placement. The move to keep families together has completely changed the department's direction, and he praised Mr. Day and his staff for working diligently to meet the needs of agencies and allocate training resources. He also raised the need for family resource centers to engage adolescents coming out of group homes and help them transition back into the community. In addition, he pointed out the needs of immigrant populations—Los Angeles County is 61 percent Latino—who may not qualify for benefits and whose children may “fall through the cracks.” These families often experience high levels of domestic violence and physical abuse, and he would like to see resources for these children in spite of limited dollars.

Although Ms. Fentress's agency has been established for 35 years, it is a relative newcomer to family preservation, having begun in August 2005. In that time, it has served 155 families, with a success due in large part to the relationships and communication developed with Mr. Day's unit, the DCFS regional offices in the area, and the Van Nuys department of juvenile probation. Supplemental services are particularly important to the agency's caseload, including individual counseling, teaching homemaking skills, and improving the day-to-day functioning of the household. Communicating to all agencies the improvement of parenting skills and a family's ability to maintain a safe environment is also key. Ms. Fentress seconded the challenges experienced with the procurement department, saying that when the goal is to keep a family together, a long delay in getting a refrigerator or a bed endangers that family's well-being. With regard to mental health issues, she finds it hard to link adults with DMH providers unless their difficulties are

persistent and severe, and most people without Medi-Cal or a severe illness don't get the level of care they need. Another of the 30 programs offered by the San Fernando Valley Community Mental Health Center is focusing on children birth to age three, and has modeled its project—part of First 5 LA's Partnership for Families initiative—on family preservation; staff have received their third training from Los Angeles Child Guidance on assessment and brain development in very young children.

PUBLIC COMMENT

There was no public comment.

MEETING ADJOURNED